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UCC FINANCING STATEMENT

201211280147

Skagit County Auditor

11/28/2012 Page

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FULLOW INSTRUCTIONS (ITOM) and back) CAREFULLY	
A. NAME & PHONE OF CONTACT AT FILER [optional]	
Commercial Loan Servicing (425) 453-5301	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Washington Federal	l
Commercial Loan Servicing	
520 Pike Street, Floor 24	
Seattle, WA 98101	
	Ī

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S EXACT FULL LEGAL NAME insert only one debtor name (1a or 1b) - do not abbreviate or combine names 1a. ORGANIZATION'S NAME GUARDIAN NORTHWEST TITLE CO. North Sound Associates, LLC OR 1b. INDIVIDUAL'S LAST NAME FIRST NAME POSTAL CODE 1c. MAILING ADDRESS 1015 14th Street, Ste C WA 98221 USA **Anacortes** ADD'L INFO RE 116. TYPE OF ORGANIZATION ORGANIZATION LLC 11. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID#, if any 1d. SEE INSTRUCTIONS LLC 603237511 WA DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME OR 2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 20 MAILING ADDRESS POSTAL CODE COUNTRY 21. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID#, if any 2d. SEE INSTRUCTIONS ADD'L INFO RE 29. TYPE OF ORGANIZATION ORGANIZATION 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b) 3a. ORGANIZATION'S NAME Washington Federal 3b INDIVIDUAL'S LAST NAME SUFFIX FIRST NAME MIDDLE NAME COUNTRY OSTAL CODE 3c. MAILING ADDRESS USA WA 98101 520 Pike Street Seattle

4. This FINANCING STATEMENT covers the following collateral:

Short Legal: Lots 19 to 24, Block 2, Whites First Add to Anacortes

Assessor's Tax Parcel ID: P60575, 3837-002-020-0005, and P60576, 3837-002-024-0001

All fixtures, equipment and other articles of personal property that is attached to or used or adopted for use in the operation of the premises and/or the business thereon described herein and all accessions, additions, replacements and substitutions relating to the foregoing fixtures, equipment and other personal property. Some or all of the collateral is located on the real estate described herein. The owner of the real estate is the Debtor/Grantor.

		ION-UCC FILING
6.	This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL [7, Check to REQUEST SEARCH REPORT(S) on Debtor(s) All Debtors Debtor [7] All Debtors Debtor [8] Optional [8	or 1 Debtor 2
8	OPTIONAL FILER REFERENCE DATA	1 1

	RELATED FINANCING STATE	MENT				
9a ORGANIZATION'S NAME North Sound Associates, LLC						
	FIRST NAME	MIDDLE NAME, SUF	- T			
S INDIVIDUAL S COST NAME	TOT HOME	MIDDLE HAME, OU				
WISCELLANEOUS:						
					IS FOR FILING OFFIC	CE USE ONLY
ADDITIONAL DEBTOR'S EXACT FULL LI	EGAL NAME - insert only <u>one</u> nam	ne (11a or 11b) - do not ab	previate or combine nam	es		
TIR. UNUMBERTHUN BINAME	And the second second	e _w				
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	_	MIDDLE	NAME	SUFFIX
MAILING ADDRESS		ату		STATE	POSTAL CODE	COUNTRY
ORGANIZATION `	TYPE OF ORGANIZATION	11f. JURISDICTION OF O	RGANIZATION	11g. ÖR		ny No
DEBTOR ADDITIONAL SECURED PARTY'S	or ASSIGNOR S/P'S	NAME - insert only one re	me /12a or 12h)	<u></u>	 	NO
12a. ORGANIZATION'S NAME	M [] ASSIGNOR SIFS	TANNIC - HOOM ONLY ONE HI	line (128 or 120)			
		and the second s				
125. INDIVIDUAL'S LAST NAME	F	FIRST NAME	Ž.	MIDDLE	NAME	SUFFIX
MAILING ADDRESS	C	CITY	ŹŊ.	STATE	POSTAL CODE	COUNTRY
This FINANCING STATEMENT covers timber collateral, or is filed as a fixture filing. Description of real estate	to be cut or as-extracted	16. Additional collateral de	scription:	**************************************		
ots 19 through 24, inclusive, Block DDITION TO ANACORTES", accoereof recorded in Volume 2 of Plats, agit County, Washington.	rding to the plat					
			2	0 1 2 °	1 1 2 8 0 1 4 7 ounty Auditor	
Name and address of a RECORD OWNER of above Debtor does not have a record interest):	e-described real estate (if		11/28/2012	_	2 of	2 3:47PN
	1	17. Check <u>only</u> if applicable	and check only one bo		operty held in trust or	Decedent's Est
	ļ .	18. Check <u>only</u> if applicabl				
		Debtor is a TRANSMIT	TING UTILITY			
	ll.	-				
		=	a Manufactured-Home	Transaction	n	